Late Contribution Report

Type or print in ink. Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

NAME OF FILER Tasha Boerner Horvath for Assembly 2022		Date of This Filing11/02/2022	Date Stamp	CALIFORNIA 497
AREA CODE/PHONE NUMBER (916)285-5733	I.D. NUMBER (if applicable) 1434881			For Official Use Only
STREET ADDRESS	·	Amendment to Report No.	Page 1 of 3	
CITY Encinitas	STATE ZIP CODE CA 92024	(explain below) No. of Pages 3		

Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
11/01/2022	DoorDash, Inc. San Francisco, CA 94107	☐ IND ☐ COM ■ OTH ☐ PTY ☐ SCC		\$2,000.00
11/01/2022	Edison International and Affiliated Entities/Southern California Edison Rosemead, CA 91770	☐ IND ☐ COM ■ OTH ☐ PTY ☐ SCC		\$2,500.00
11/01/2022	Faculty for our University's Future, a committee sponsored by the California Faculty Association Small Contributor Committee Sacramento, CA 95814 ID# 850007	☐ IND ☐ COM ☐ OTH ☐ PTY ■ SCC		\$2,000.00

*Contributor Codes	
IND - Individual	PTY - Political Party
COM - Recipient Committee (other than PTY or SCC) OTH - Other	SCC - Small Contributor Committee

Reason for Amendment:

FPPC Form 497(June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

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CITY Encinitas	Z STATE ZIP CODE CA 92024		(explain below) No. of Pages	3				
Late Contrib	ution(s) Received							
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11/01/2022	LE03-Awin Management, Phoenix, AZ 85054	Inc.		☐ IND ☐ COM ■ OTH ☐ PTY ☐ SCC ☐ IND			\$4,900.00	
				COM OTH PTY SCC				
				☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
*Contributor Codes IND - Individual COM - Recipient C OTH - Other	s committee (other than PTY o	PTY - Political Party or SCC) SCC - Small Contributor Committe	эe					

Reason for Amendment:

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CITY STAT Encinitas CA		STATE CA	ZIP CODE 92024	(explain below) No. of Pages	3					
Late Contri	ibution(s) Made									
DATE MADE	FULL NAME, MAILING ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)			CANDID MEASURE	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION				DATE OF ELECTION (IF APPLICABLE)	

Reason for Amendment:

FPPC Form 497(June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC